**Application or Docket Number** 

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS			(Column 1)		(Column 2)		•	TYPE		OR		
TOTAL CLATIVIS			22					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			2 Z minus 20=		. 2		•	X\$ 9=		OR	X\$18=	36
INDEPENDENT CLAIMS			2 minus 3 =		4		•	X40=		OR	X80=	320
MULTIPLE DEPENDENT CLAIM P			RESENT					+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0"						olumn 2	المقر	TOTAL		OR	TOTAL	1066
CLAIMS AS AMENDED - PART II								OMA!!		-	OTHER	
_		(Column 1)	<u>-</u>	(Colu	mn 2) HEST	(Column 3)	1	SMALL		OR •	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		= 1	]-	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CLASS	=		X40=		OR	X80=	
<b> </b>	TINO I PHESE	NTATION OF M	OLITE DE	CINDEN	LEAIM	ــــالسنا	Ĺ	+135=		OR	+270=	
	•							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)	)	ADDIT. FEE			AUDII, FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREV	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*.	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T () 4144	=	-	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C	,	CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N N	Total	*	Minus	**		=		X\$ 9=		ÖR	X\$18=	
	Independent	*	Minus	***		=		X40=			X80=	
	FIRST PRESE	NTATION OF M	IULTIPLE DEPENDEN		T CLAIM					OR		
	If the entry in eath	mn 1 is loss than	the entry in col-	ımn 2 wei	te "N" in co	dumn 3		+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
1 "	"If the "Highest Nu The "Highest Nur							ound in the ap	propriate bo	x in co	olumn 1.	